

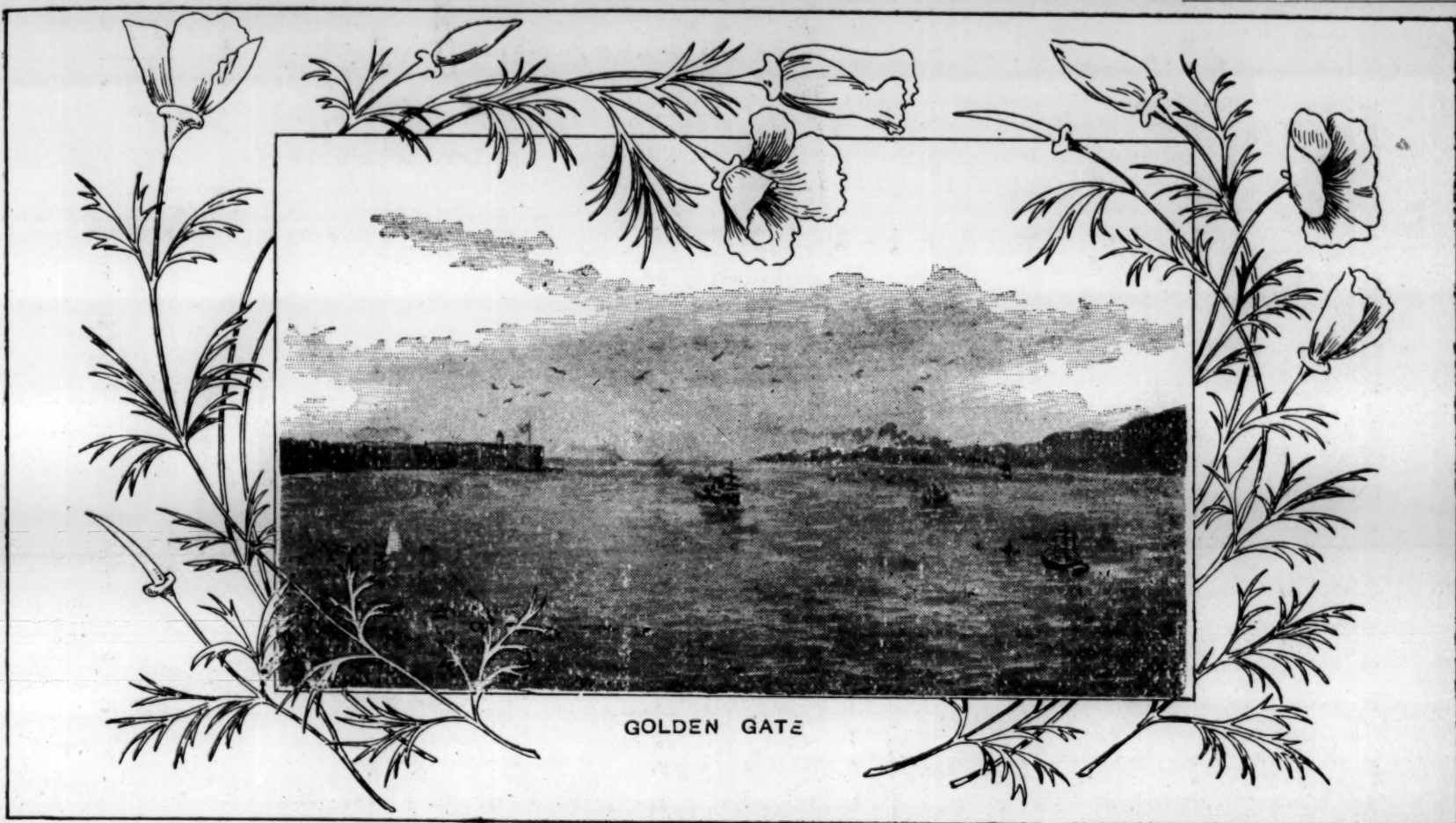
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California Medical Journal.

VOL XVII.

San Francisco, November, 1890

NO. II.



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FREDERICK JOHN LOCKE, M. D.
DEAN OF THE ECLECTIC MEDICAL INSTITUTE, CINCINNATI, OHIO.

California Medical Journal.

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San Francisco, California, November 1896

NO. II.

A Review of Serum Therapy, (No. 4) (Concluded.)

M. H. LOGAN, Ph. G., M. D., San Francisco.

HYDROPHOBIA.—The exact nature of the virus of this disease is unknown, but it has been demonstrated that the virus is located within the tissue of the nerve substance. It is evident from the symptoms and manner of death that the poison belongs to the toxalbumins. The presence of micro-organisms has never been demonstrated however.

In practice an infusion of the spinal cord of a rabid animal is used to immunize sheep. An emulsion of the spinal cord of the immunized sheep, somewhat attenuated, is used on man. Daily doses of gradually increasing strength are injected for twelve days. This treatment is begun immediately after the patient has been bitten by a rabid animal, and the mortality had been reduced to an average of one per cent. Another method is to use the blood serum of a thoroughly immunized sheep, from which is obtained a precipitate composed largely of the anti-toxin, $\frac{1}{4}$ of a gram of this precipitate is dissolved in $1\frac{1}{4}$ grams of distilled water,

and this is taken at one dose.

Last year 167 cases were treated at the New York Pasteur Institute, with but two deaths.

INFLUENZA.—The bacillus of this disease was discovered in 1892. Rabbits were inoculated with cultures and after they had been proved immune, the blood serum was used on man with varying success. A similar method is practiced on horses.

PNEUMONIA.—It is claimed that the micrococcus of pneumonia was discovered in 1880. It is sometimes found in the saliva of healthy human beings. Rabbits were experimented upon with filtered bouillon cultures, and immunity of six months' duration was obtained. The term *micrococcus pneumonæ crouposæ*, or *micrococcus lanceolatus* was given to it. The toxic substance was found to be a proteid body, which is called pneumotoxin. The substance produced in the body of an animal as a result of the protective inoculation is also a proteid, and is called anti-pneumotoxin. This was isolated from

the blood of immune animals. Doses of from 5 to 7 cc. of blood serum from immune rabbits were used on man with the result of slightly modifying the disease. In treating the pleuropneumonia of cattle the results are more satisfactory. A similar treatment was first practiced in 1850.

SMALLPOX—Inoculations of the virus obtained from a pustule of a smallpox patient were extensively used before the time of Jenner, the practice being recorded in Turkey at the beginning of the eighteenth century. In the early days of vaccination it was claimed that a lifelong immunity was conferred, but even with our present successful vaccination this is not now conceded.

The method of immunizing calves and collecting and preserving the virus needs no description here. The toxin and antitoxin are combined in the virus.

ERYSIPELAS, PUERPERAL FEVER, and some forms of DIPHTHERITIC INFLAMMATION of the throat are supposed to be due to the special micro-organism *STREPTOCOCCUS PYOGENS*. When obtained from erysipelas or puerperal fever, it has led a saprophytic existence for some time, or when it has been cultivated in artificial media, its virulence is greatly diminished. Bouillon cultures have been used upon rabbits in doses of from 1 to 2 cc. which were gradually increased for 15 days, when it was found that they could stand a dose five times as large as was required to kill an unimmunized animal. Experiments on human subjects have not yet proved satisfactory.

TETANUS.—In 1889 it was discovered

that an injection of a pure culture of tetanus bacillus produced typical tetanic symptoms and death. It was also discovered that death was caused by a toxic substance in the blood, which was classed as a toxalbumin. The purified toxin crystalizes in slightly yellowish transparent scales, odorless and almost tasteless. A .23 of a milligram is a fatal dose for a man, proving it to be one of the most deadly of poisons—150 times as potent as strychnia and 600 times as atropina. Its only known solvent is water. As it has not the physical properties of an alkaloid it seems to belong to the ptomaines. It closely resembles serpent poison. With virulent cultures of it small animals have been immunized. The blood serum of these animals when treated with alcohol yields the antitoxin as a solid precipitate. This precipitate is dissolved in distilled water, and from 40 to 50 centigrams is said to be sufficient to cure tetanus in a man. Several successful cases were reported. This antitoxin is now prepared at the New York Biological Institute in powdered form, and sold at the rate of 3 grams for \$5.00.

TUBERCULOSIS.—The announcement of the discovery of the tubercle bacillus by Koch was made in March, 1882. In 1865 it had been demonstrated that tuberculosis might be induced in healthy animals by inoculations of tuberculous material. Bouillon cultures were injected into healthy rabbits and they died of tuberculosis in about a month.

Koch's tuberculin is obtained from cultures reared in an infusion of calf's

flesh or beef extract. From this a white precipitate is obtained with alcohol, and from $\frac{1}{2}$ to 1 gram in glycerine and water is a dose. This precipitate is an antitoxin.

Tuberculin of many varieties and strengths has been prepared. The most persistent treatment by inoculation has many times failed to eradicate this hardy bacillus. The best and most recent investigators acknowledge that protected animals sometimes slowly relapse. One of the most enthusiastic writers on this subject has said that "the clinical evidence shows that in early and properly selected cases the treatment may exercise a favorable influence on the progress of pulmonary tuberculosis, but that it can by no means be accepted as a specific for this disease, and in advanced cases its injudicious use may do harm. It is evident that in a disease in which recovery sometimes occurs independently of treatment, and in clinical experiments upon patients who differ in their susceptibility to tubercular infection and in other important particulars, and in the absence of 'controls' such as we find it necessary to employ in experimenting upon the lower animals, the reported results of any plan of treatment must be accepted with great caution."

Some of the later bacteriologists report unfavorably upon tuberculin for pulmonary tuberculosis, but observe that in various forms of skin tuberculosis a curative effect was manifested.

The treatment should take about one year. Collateral treatment and change of climate are always recommended.

Anti-tubercle serum is put up in half-ounce vials which are sold at \$3 each.

TYPHOID FEVER.—In 1887 the typhoid bacillus was isolated, but it is so very much like the *bacillus coli communis* that there yet seems some doubt of its independent identity. However, the toxic substance is there, and it kills small animals inoculated with it very rapidly. Susceptible animals are made immune by inoculations of sterilized cultures. Now the serum obtained from an immunized animal contains an anti-toxin. With the most persistent use of this substance the results have not been satisfactory.

YELLOW FEVER.—The most approved bacteriological investigations fail to demonstrate the constant presence of any particular micro-organism in the blood and tissues of yellow fever cadavers. In 1854 and 1855 inoculations protective against this disease were used in Havana. In Brazil in 1887 the idea was followed up very thoroughly but the results were not satisfactory, and it has since been abandoned.

The venom of an ophidian was tried for awhile in Cuba, but its use has also been abandoned.

ACUTE DELIRIOUS MANIA.—Dr. T. L. Badcock of the St. Lawrence State Hospital claims to have located the microbe of this disease. From a patient suffering from this affliction he drew off a quantity of cerebro-spinal fluid from the subdural space of the cord in the lumbar region. From the fluid a sediment was precipitated in the usual way, and the microscope revealed large quantities of the germ

micrococcus pneumoniae crouposæ. Rabbits were inoculated with the fresh fluid, and evinced many symptoms similar to those of acute mania. A second lot of the cerebro-spinal fluid from the same patient contained beside the micro-coccus pneumoniae crouposæ many germs of streptococcus pyogens, the common ones of suppuration.

SNAKE AND SCORPION POISONS.—It has long been known that Indians and Mohametan fakirs were immune from the venom of the cobra, karites, some other serpents, and the scorpion. Upon investigation it was found that these men are frequently bitten, thereby establishing a tolerance which lasts for a variable length, and as they are constantly handling these reptiles and occasionally getting bitten, their immunity is constantly re-enforced.

CATHODE RAY.—Consumption is dead; diphtheria was killed outright; typhoid was annihilated; cholera has been stunned for fourteen days; pneumonia was barely able to resume its work; anthrax and glanders escaped with serious injury; influenza missed slaughter by its position under the tube.

These astounding announcements were made by two professors of the Bennett Medical College of Chicago, and they declare to the world that the Roentgen ray or the so called X ray is the cure for these diseases.

Cultures of these germs in glass tubes were exposed to the influence of the ray, with the results above given.

GENERAL NOTES.—Rectal injections of the different antitoxins are sometimes given, and are said to be quite as effi-

acious as hypodermic injections.

DISEASE GERMS IN THE CAUSE OF CUBAN LIBERTY.—According to the Madrid press, Spain, up to the 10th of March, has sent to Cuba nearly 118,000 men in addition to the 13,000 who were on the island when the war began. Official returns show that 406 perished in battle, while 3,427 died from yellow fever and other diseases. Disease germs seem to be more efficacious than powder and balls.

The antitoxins are usually preserved in weak solutions of trikresol carbolic acid or iodine terchloride. May not these antiseptics have a large share in the alleged curing process?

Since the work of Jenner a century ago hundreds of thousands of dollars and many years of scientific investigation, any number of animal lives and some human lives have been sacrificed in chasing the beautiful chimera of immunity and the end is not yet.

The California Eclectic Medical Journal.

A year ago we predicted the prosperity of The California Medical Journal. Our predictions have been verified. Since its present editor has been pushing matters it has taken a high stand and is up at the top in all things. It is progressive and full of spirit, and its contributions are of the right mettle. We suggest, that our readers subscribe for it for 1897 in conjunction with THE TIMES. It will pay you.—October issue, *Chicago Medical Times*.

The moon's change is all in quarters.

Oriental Therapeutics.

BY ELEANOR ROYCE INGRAHAM, San Francisco.

To the busy doctor who diligently strives to keep pace with the rapid advance in modern therapeutics, to the bacteriologist who wrestles with subtle problems in the laboratory, and to the general reader who contemplates the wondrous results of *fin-de-siecle* enterprise and scholarship, it may afford amusement to turn aside for a few moments and to peep into a rusty volume of ancient lore whose contents are, by over 3,000,000 people held as sacred today as 2,000 years ago.

With a sublime indifference to the world about them, and with a self-complacence that passeth understanding, the dwellers in the Celestial Kingdom have for centuries lived in the profoundest ignorance of physical science. It is difficult to grasp the enormousness of their deprivation—for such it must seem to the privileged outsider. In literature and the arts there are not wanting elaborate productions among the Chinese. These are after stereotyped models, to be sure, and originality is rare. Learning of this sort is however, revered and its dissemination universal. But of nature's secrets they know practically nothing. They have not yet advanced as far as the alchemists of the middle ages, though they cherish a few of the latter's most primitive ideas. They be-

lieve in the existence of a philosopher's stone once possessed by their ancestors but unfortunately lost, and, like all other nations, they have sought for the elixir of life, but as their operations are based on ancient superstitions and empirical data, they have made no advance in scientific knowledge. The bold and original experiments of the enterprising occident are beyond their conception. In their category there are five elements, fire, water, metal, wood, and earth.

These, we are told, exist in the human body and are related in a mysterious way with "the five planets, the five senses, and the five colors." Illness is caused by a conflict of these elements, and it is the physician's duty to preserve the balance of power among principles naturally antagonistic. His preparation for this grave function is not of a sort to inspire the confidence of a suffering white man. He needs, in fact, no preparation whatever. There are no medical colleges in China, and no medical examinations. The veriest charlatan is at liberty to amuse himself by visiting the sick, and administering decoctions whose effect has not the remotest relation to the cause of the malady. If by chance, or by virtue of possessing nine lives, the patient recovers, he gives thanks



to the gods and the doctor. If he dies, his relatives stoically observe that "'twas in accordance with the will of Heaven," and go about their business as usual. Truly the fatalist has his rewards. Only the Emperor's physicians run the risk of disgrace by failure. It would seem that the person of the Celestial ruler is not to be left entirely to the mercy of "the will of Heaven," and the unlucky attendant whose potations damage the royal interior, is forthwith condemned to ostracism and ridicule, and perhaps poverty as well. The justice and wisdom of this are not patent to the barbarian without the pale of Celestial enlightenment, but fortunately his opinion cuts no figure in the matter.

Medical knowledge in China is largely a matter of inheritance, the majority of physicians tracing the secret of their prescriptions back in a direct line for many generations. Some of their herb preparations undoubtedly do possess a certain degree of merit, and the doctors who make a specialty of these may be placed at the head of the profession. A second class is composed of those who, having failed at the national examinations for civic promotion, fall back upon the study of medicine as a means of preserving their dignity and consoling themselves withal, much as love sick youth turns to philosophy. Such a physician culls a portion of his prescriptions from published records, while others are evolved from his own inner consciousness. A third class, and a large one, is made up of men who cannot quote even the questionable authority of the Galens of China,

and are the basest of quacks. A few statistics taken from the works of Robert K. Douglas, (keeper of Oriental MSS. in the British Museum, and Professor of the Chinese language at King's College) may serve to convey to the reader some conception of this marvelous "system of medicine," which is said to have been invented by the ancient Emperor Hwang-te, and which its exponents now proudly declare has been "brought to the highest degree of perfection." He says Dr. Henderson has ascertained that "in the native pharmacopœia there are enumerated 442 principal medicines as being in general use. Of these 314 are derived from vegetable products, 50 from minerals, and 78 from animal substances. Among the monstrous tonics prescribed are asbestos, stalactite, fresh tops of staghorns, the dried skins of red-spotted lizards, and dog's flesh." Among astringents they class "the bones and teeth of dragons, oyster-shells, loadstone, talc, gold-leaf, and silver-leaf," while the following are regarded as purgatives;—"verdigris, calcareous spar, catechu, pearls, bear's gall, shavings of rhinoceros' bones, and turtle-shell." Poisons appear to come under one head, for elephant's skins and ivory are mentioned as antidotes without further specification.

The august body known as the Medical Board, which is situated at Peking, has divided all diseases into eleven classes, as follows:—(1) Diseases of the large blood-vessels, (2) of the small blood-vessels, (3) of the skin, (4) of the eye, (5) of the mouth, (6) of the teeth, (7) of the throat, (8) of women

(9) of the bones, (10) fevers, (11) cases arising from acupuncture." Without pausing to comment on this unique and logical arrangement of human ills, permit me to present from among many instructive dissertations, the following learned treatise on hydrophobia. Let the aspiring young specialist who is feverishly pursuing the chimera of serum therapy, and nightly dreams of toxine, anti-toxine, and attenuated cultures, but cast his eye on this lucid exposition of an original and scientific treatment, and his sordid ambition will fade away:—"Take the curd of the black pea, dried and pulverized; mix it with hemp-oil and form it into a large ball. Roll this over the wound for some time, then break it open, and the inside will present a hair-like appearance. Continue the rolling until on breaking it open it is found to have lost the hair-like aspect. The patient must avoid eating dog-flesh or silkworms, and he must not drink wine or inhale the fragrance from hemp for one hundred days. Neither may he eat with safety diseased meat, or anything in a state of decomposition. * * * He must daily partake of plum kernels. When the poison of the dog has entered the heart of the victim and produced feelings of misery and wretchedness, the stomach swells, and there is an abundant secretion of saliva. It is then proper to try the effect of the skull, teeth, and toes of a tiger ground up and given in wine in doses of one-fifth of an ounce. If a speedy cure does not follow, the person becomes mad * * * and death quickly ensues." It is to be regretted that an

illuminated copy of this effusion could not have been forwarded to Pasteur.

That the Chinese have absolutely no knowledge of anatomy is a well established fact. They have a horror of surgery—a sort of superstitious horror, connected with their religion apparently—and when given into the hands of a white physician have, in many instances been known to die rather than submit to an operation with the knife. Their frequent suffering from tumors seems particularly needless. Even their post-mortem examinations are of a most superficial nature, and it is mainly through the occurrence of accidents that they have obtained any idea whatever of the position and relation of the internal organs. They are not aware that the blood circulates, and their interpretation of the pulse is unique and amusing. That in the left wrist is believed to indicate the condition of certain portions of the body, particularly the heart, and that in the right the condition of certain other portions, as the lungs, liver, etc. The patient whose hands rest alternately upon a silken cushion during this examination, has faith in his physician's ability to detect the slightest variation in the pulse's fluttering and thus to diagnose the most delicate complications without imposing upon him any inconvenience, unless it be that of thrusting out the tongue, from which the silent sage reads more things than are dreamt of in our philosophy. What functions appertain to the organs whose condition he thus infallibly determines, he could not tell you—at least not to your

satisfaction. The main tenets of his physiological belief are that the gall-bladder is the seat of courage and that all ideas and delights spring from the heart and the pit of the stomach. (It occurs to me on reflection that this latter theory is not wholly inapplicable to the sterner sex, and we may ponder on its worth at our leisure.)

It would be of interest to know what passes in the mind of the learned doctor, as he releases your hand and begins to write his prescription. In China it is considered proper that a lady patient should sit behind a screen during the consultation, only thrusting her hand through, for the face must not be seen of men, and as it is not customary for a physician to ask questions, he can judge but little of his subject's actual condition. However, it is not necessary, as already stated that there should be any relation, earthly or otherwise, between the remedy and the disease, and we may not follow the intuitive promptings of the doctor's exalted imagination, as his pencil slowly shapes the mystic symbols of those substances which are to harmonize the opposing elements of our organization and restore us to happiness. Many of the herb mixtures possess an aromatic flavor which is quite agreeable, but most of them are heavily perfumed with musk or other ingredients whose odor overpowers the foreigner's sensibilities. A number of white people testify to having been cured of serious stomach trouble by the use of Chinese prescriptions, but the majority of the medicinal compounds proffered by these almond-eyed

wise acres would not be touched by a white person who knew what they contained. A San Francisco gentleman who has traveled in China and lived in close business relations with its natives here for many years, is authority for the statement that the most unappetizing animal substances are freely used. Horned toads, lizards, snakes, rats, the enormous cockroaches native to China, and even more disgusting materials are esteemed valuable curative agents, and introduced into the sufferer's stomach. The witches' potion in Macbeth is not more revolting.

Of all the herbs in their pharmacopœa the most widely sought and high-prized is ginseng. It is known by our own physicians to possess certain tonic properties, but by these people it is regarded as a panacea, and fabulous prices are paid for it. In this as in all other matters, superstition plays a prominent part, and the price is regulated by the shape of the root rather than by its actual quality or size.

Certain specimens have brought their weight in gold. There may be seen in San Francisco now a number of Koreans (wearing their native dress) who are engaged in buying up ginseng and importing it to their own country; where it is more rare and brings many times the American selling-price.

However, the majority of the remedies displayed in the drug-stores of China are very cheap compared with our own, and by a wise dispensation of Providence the fees demanded by doctors there are merely nominal, so that a few rash experiments upon his own internal

economy will not cost the aspiring tourist dear (if the mercenary aspect be all that is considered). The native diffidence of the medical profession in this regard is peculiarly commendable, but by the sophisticated members who have left their own land and dwell abroad, it is cast aside. The pigtailed physicians located in San Francisco have come to a knowledge of their own worth, and charge the benighted Americans accordingly.

One of this class (who died a few years

ago, after amassing a fortune) had the forethought, when entering upon his profession, to purchase a series of anatomical charts and display them conspicuously about the walls of his office. It is needless to say that the effect was artistic and instantaneous. But it was only to his most susceptible lady patients that he repeated, with the fortitude of Galileo: "And still there are seven lungs and the heart is situated on the right side."

The New Santa Barbara.

FREDERIC S. OLIVER, Santa Barbara, Cal.

DEAR EDITOR:—It seems to your old friend, the writer, that since "OUR" JOURNAL has given space to Arizona descriptive articles, that a few pages devoted to "New" Santa Barbara may not be amiss. True, there is no Eclectic physician yet established here, but that is the Eclectics' fault, for this is a city of 10,000 people, and our School can hold its own, and make head against any other practice of the day. Santa Barbara is rich, and a fine field. It has three daily and many weekly, and even a few monthly publications. But that is not mainly the topic. "New" Santa Barbara is the theme. When the electric railway that has been getting ready by laying lines of track on Haley, State, Carillo, Chapala and Dola Vina, as well as some other

streets, "touched the levers" of its cars on October 1st, then began a new era of prosperity—then began New Santa Barbara. Of course most readers, even of "OUR JOURNAL," which has thousands of subscribers in this and other States of the Union, have by this time learned something of the great doings of the "Santa Barbara Consolidated Electric Railway Co." Eventually the company, of which Mr. A. E. Miller is President, Mr. Luster the Secretary, and Mr. Miller, Vice-President, will extend its rails not only to gridiron this city, but also to run south to Carpinteria, twelve miles, and up the coast to Golita, nine miles. At present trolley poles are set as far as the thriving oil-town and spiritualist colony of Summersland.

The daughter of the president of the road, an accomplished electrician, was the pretty—and by the dense throngs on the streets—vociferously applauded “motorman” of the car that headed the procession of handsome cars up State street. Following came the car devoted to prominent city officials; then one to the members of the press, and others to other invited guests of the company. All cars were profusely flower-garlanded.

Omitting further description as not germane to these pages, let a word be given to Santa Barbara as it is to-day.

The city has a splendid electric light service second to none; a telephone system of which all citizens are proud; an electric fire alarm action and engines to attend to fire calls—both city property. Its ocean boulevard, and its “State Street” bitumen-paved for two miles of its length—all these things and others not mentioned here, are things that make the New Santa Barbara. All but the electric railway it has had for some time; but this last enterprise has filled the city with life, and activity is rampant. Great buildings are being let for construction and several are now almost completed, notably the Fithian building, a four-story edifice occupying a quarter of a block. The old sluggish era has passed away and all things are become new, almost aggressively new. To the balmy delights of an Edenic climate is added the bustle and push of colder climes. Hail to “Santa Barbara la Nueva!”

The President of the Consolidated Electric Company of Santa Barbara,

Mr. C. W. D. Miller, in a recent interview regarding the prospects of our town, said:

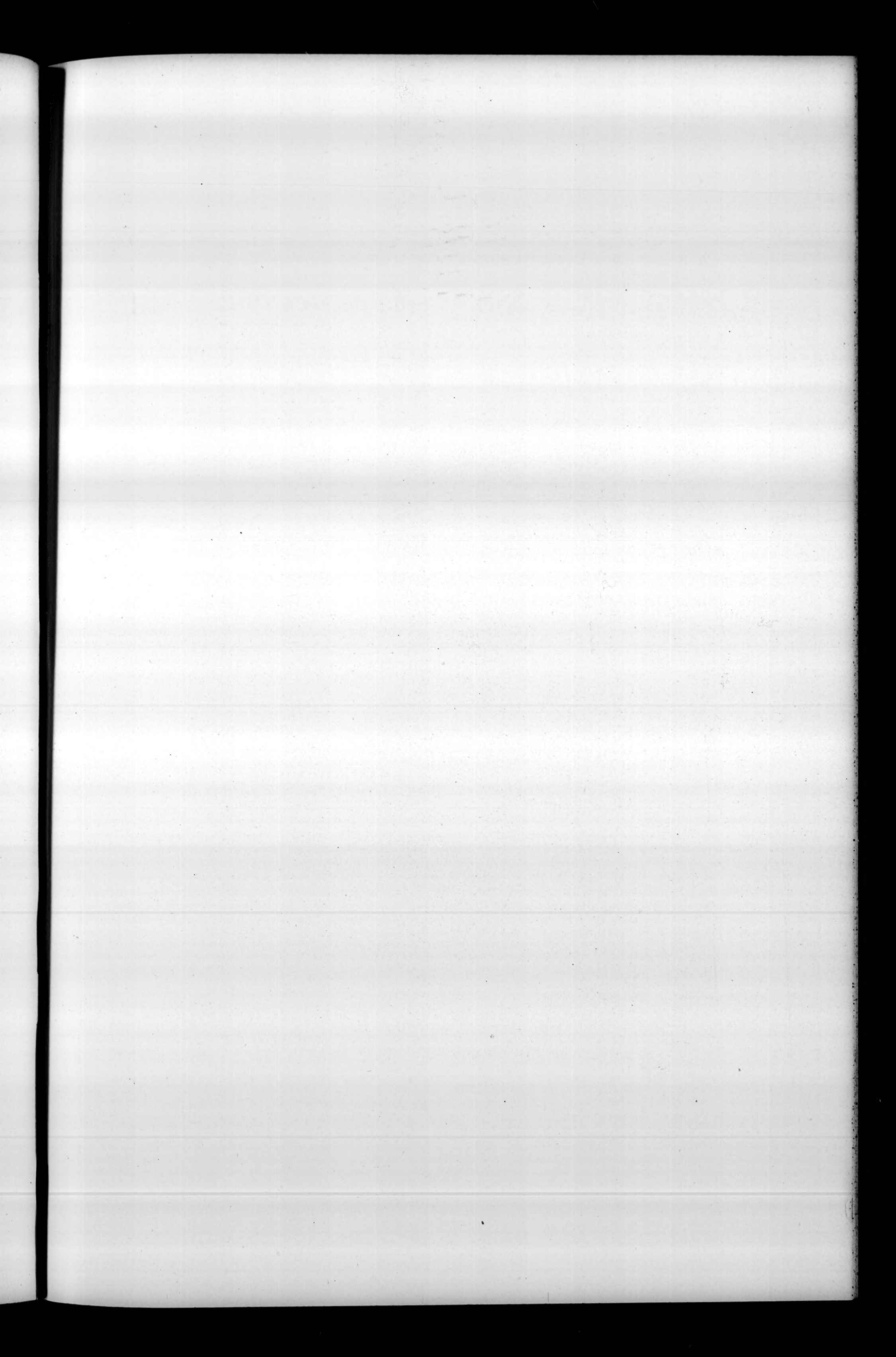
“Wide-awake business men see a satisfactory present in, and a bright future for Santa Barbara. I can give you an instance or two. Mr. Peckham of New York City, a bustling business man and the largest truck manufacturer in the country, came to Santa Barbara on purpose to sell us trucks for our cars. He was so charmed with this place that he prolonged his stay long after his business had been transacted; in fact, he was so sanguine about Santa Barbara that he encouraged us greatly to go ahead with the electric road.” Mr. Peckham says he is coming to Santa Barbara again next winter, and will invest in property here.

“Another gentleman, Mr. J. R. Hammond, of the California Car Works, San Francisco, was here recently. He was enthusiastic in his praise of Santa Barbara, and says he is coming again, with his wife, and that if finances don’t pinch any harder than they do now, he will invest in Santa Barbara property.

“So you see strangers—of business qualities—don’t consider Santa Barbara dull, but just the reverse.”

The low stoop of the bicycle rider may appear distressing to others but it is quite clear that the one who assumes it thereby “doubles” his pleasure, if he has any.—*L. A. W. Bulletin.*

Outdoor exercise is a great medicine, and the bicycle makes it easy to take.





DR. HENRY L. DEIMEL
PRESIDENT OF THE DEIMEL LINEN-MESH SYSTEM CO.

Dr. H. L. Deimel.

Editorial, October Issue, Chicago Medical Times.

"Perhaps all of the students of Bennett of 1884 and '85 will remember Dr. H. L. Deimel, the tall, dignified, earnest student who made only friends by his kindly manner and thoughtfulness.

After graduating, Dr. Deimel went to Denver, Col., and immediately established a successful practice, but his health failed, and almost without hope of recovery he went to Southern California. Here his health returned. He established himself at Santa Barbara, and has become widely known and universally esteemed.

He early became convinced that the usual method of dressing was not perfectly adapted from a sanitary standpoint to the best preservation of health and comfort. He began looking about for the best material for underwear, believing that woolen underwear harbored disease. With this object in mind he went to Germany in 1893, and while thoroughly investigating their methods of preparing linen fabrics, and noticing the fact that in Germany and in Russia linen was used in preference to wool or cotton, he became convinced that this material, woven by a peculiar German method in open mesh, was the material he was after.

He came back to New York, established a stock company for the manufacture of a fabric from the purest of white linen, which experience has proven to be a most superior article for health underwear.

Passing through Chicago on his way home he presented this editor with a full outfit which has been worn since, almost to the complete exclusion of other underwear. Speaking truthfully, the pleasurable sensation produced by the Deimel Linen-Mesh Underwear is indescribable. It has the appearance of pure white silk, is very handsome, and as soft after the first washing as old linen lint. In its contact with the body it is not only not irritating, but soothing. It is cool in summer from its open, porous character, and it is warm in winter. For a thin, weakly person the heavier quality must be worn; but for fleshy, healthy persons who perspire freely, the medium weights can be worn with much greater comfort than heavy flannels. In fact, no one who has ever worn Dr. Deimel's linen mesh will ever resort to flannel again for underwear.

The doctor has certainly made a most important adaptation in this for health and comfort, and the enthusiasm with which physicians are receiving it and advise its adaptation to their patients prove its real merit. We are conscientious in advising our readers to write directly to the Deimel Linen-Mesh System Co., 111 Montgomery street, San Francisco, who will take pleasure in corresponding with them. The doctor is an enthusiastic Eclectic, and does us proud in his locality and wherever known.

Notes, Scraps and Prescriptions.

FRANK D. WALSH, M. D., San Francisco.

AN OINTMENT FOR RHEUMATIC JOINTS.—

R Salicylic acid
Oil of turpentine
Lanolin, of each $2\frac{1}{2}$ drachms.
Lard, 3 ounces.

—Jour. des Practiciens.

FORMULAS.—For mild conjunctivitis:

R Boric acid gr. x.
Biborate of sodium gr. iv.
Distilled water $\frac{3}{4}$ i.
M. Sig: Use freely three times a day.

For conjunctival hyperæmia:

R Boric acid gr. x.
Hydrochlorate of cocaine gr. ii.
Rose water $\frac{3}{4}$ ss.
Distilled water $\frac{3}{4}$ ss.
M. Sig. Use freely three times a day.

For subacute conjunctivitis:

R Biborate of sodium gr. viii.
Camphor water $\frac{3}{4}$ i.
Distilled water $\frac{3}{4}$ i.
M. Sig. Use freely three times a day.
—Ontario Med. Jour. Dec. 1894.

Blepharitis:

R Red oxide of mercury grs. x.
Vaseline fl. $\frac{3}{4}$ ss.
M. Sig: Apply to the edge of lid at bedtime.

R Ammoniated mercury grs. xx.
Powdered camphor grs. x.
Vaseline fl. $\frac{3}{4}$ ss.
M. Sig: Apply at night.

R Sol. of subacetate of lead grs. x.
Ointment of rosewater $\frac{3}{4}$ ii.
M. Sig: To be used for more chronic forms of marginal blepharitis.

—Mittendorf.

Good local anæsthetic:

R Menthol $\frac{3}{4}$ i.
Chloroform $\frac{3}{4}$ x.
Ether $\frac{3}{4}$ xv.

M. Sig: Use as a spray over field of operations. Anæsthesia lasts from two to six minutes.

—Louisville Med. Monthly.

Horsehair, thoroughly cleaned and ready for use, is now kept by some instrument dealers. It never absorbs anything, is as impervious as glass, and can be rendered perfectly aseptic. It is valuable in all suturing of the skin.

—Lewis.

DEPILATORY FOR SURGICAL OPERATIONS.

—To remove hair from scalp, peri-anal or scrotal region, without using razor, cut hair off with scissors, then apply paste made of *sulphohydrate of calcium*, mixed with a little water. Make layer one millimeter thick. No pain or erythema. In less than ten minutes hair can be rubbed or washed off, to grow again in several days.—Annequin, *Medicine Modern*, July 28, 1894.

DIAGNOSIS OF EXTRA-UTERINE PREGNANCY.—The following symptoms suggest ectopic pregnancy:

1. The absence of menstruation, or a flow coming at irregular intervals, and of uncertain duration.

2. Pains of a severe and spasmodic character, which may be permanent at first, then absent for some weeks, to return later with renewed vigor.

3. Vaginal discoloration—a symptom of some importance, yet often noticed in cases where some other form of pelvic tumor is present.

4. General signs of pregnancy, such as nausea, enlarged and tender breasts, increase in size of the papillæ, darkened areolæ, milk in the breasts, ballottement, the pressure of a tumor, irregular menstruation, and, possibly, gait.

5. The history of having had a child or miscarriage. This is important, as cases occurring in nulliparous women are rare.

6. Expulsion of decidua. This symptom is of great importance, although in the majority of cases we are not fortunate enough to have it present; or, if present, the clot and shreds of tissue are thrown away before a microscopic examination can be made.

7. Increase in size of the uterus, with the fundus either pushed forward or to the right or left side.

8. Elongated, soft and patulous cervix.

9. The appendages on one side containing a thin walled and tender cyst. The fact, however, that a tumor is felt upon both sides should have no bearing upon the diagnosis, as one of the tumors may be due to extra uterine pregnancy, and the other to some other form of tubal, ovarian or pelvic trouble.

10. Pulsation of vessels in neighborhood of cyst.

11. The rapid increase in the size of the tumor.

12. Presence of foetal heart sounds.

13. Presence of placental bruit.

14. Feeling the small parts of the child, either through the vagina or rectum, or by combined manipulation.

When the diagnosis is made, the author holds that the right policy is to operate.—Haven, Boston Med. and Surgical Journal.

HOW SHOULD THE GENERAL PRACTITIONER DEAL WITH STRANGULATED HERNIA?—Gerster holds that the conduct of the general practitioner in dealing with a case which may possibly be, or is, strangulated hernia, should be regulated in accordance with the following rules:

1. In cases of uncertainty give the benefit of the doubt to the assumption that an obscure tumor of the groin is a hernia.

2. Be gentle in attempting taxis, and do not spend too much time over it.

3. Be thoroughly aseptic in herniotomy, and divide the constricting bands freely, *not with the probe-pointed knife* cutting from within outward, but with the scalpel under the guidance of the eye, from without inward.—Boston Med. and Surg. Journal, July 20, 1893.

TREATMENT OF MEDICAL EMERGENCIES.—Papers and discussions on the treatment of surgical emergencies are quite common, but the subject of medical emergencies is very rarely mentioned; yet the cases demanding medical treatment are met with as frequently as are the cases requiring surgical interference.

It is not my intention to consider the symptoms or causations of the following conditions at all, or only very briefly.

General treatment only will be men-

tioned, as *indications for specific medications*, with which you are all familiar, are *always* to be fulfilled.

The medical emergencies that demand treatment most frequently are :

First—Syncope or fainting.

Second—Apoplectic seizure.

Third—Convulsions.

Fourth—Hemorrhage.

Fifth—Asphyxia.

Sixth—Aid to persons injured by electric currents.

1. Syncope is;—A state of suspended animation due to sudden failure of the action of the heart. The heart does not cease to beat unless it be a fatal syncope, but its action is so feeble that enough blood is not sent to the brain to maintain consciousness.

The symptoms of fainting are so well known to every one, that they need not be considered.

In the treatment of syncope two indications have to be met, namely, removal of the cause of faintness, and restoration of the action of the heart. The patient should be laid flat on his back, and the windows in the room thrown open. The dress should be well loosened about the neck, chest, and abdomen. Diffusible stimulants, aromatic spirits of ammonia, brandy or ether, should be administered, or strong ammonia may be inhaled. Cold water is a remedy which can be quickly procured, and by dashing it in the face the respiration may be excited and the heart in turn caused to beat.

2. The apoplectic seizure is a much more serious condition, and it often ends fatally. Apoplexy is itself a symptom, and can only claim to be

treated as a disease on account of the frequency with which it presents itself as the prominent element in a patient's state. The striking feature of apoplexy is loss of consciousness without obvious failure of the heart's action.

When called to a case, the following conditions will present themselves to us. The patient, who has usually been removed immediately home, or to the hospital, lies on his bed as if asleep; his respiration is either quiet and deep or loud and stertorous; he cannot be aroused in any way, even by strong irritation of the skin (pricking, tickling); his eyes are closed, and the pupils usually of medium size, neither much dilated nor much contracted, have lost their power to react. With every expiration the cheeks are slightly puffed out, and it is often soon apparent that one corner of the mouth is lower than the other. The face is flushed as a rule, but (very rarely) it may be pale. The extremities are relaxed, and when raised drop loosely. The tendon reflexes are absent in severe cases, and neither the cremasteric nor the plantar reflex can be obtained. The pulse is full, somewhat slow; the temperature normal, perhaps slightly subnormal; the urine presents no changes, or may contain a trace of albumen, rarely of sugar.

This condition may last several minutes, several hours, or even one or two days; in severe cases the patient usually dies without having regained consciousness.

The sudden onset, followed by the above conditions, make the diagnosis in the majority of cases easy; but occa-

sionally cases are met with in which the *diagnosis at first* is very difficult, if not impossible.

In treatment, *stillness* is the most important condition. The patient should be placed in the recumbent position, with the head slightly elevated, and *moved only when necessary*. If the face be flushed, cold may be applied to the head with benefit; if the extremities are cold, warmth should be applied to them. Venesection and *purgation* (the latter preferred) are remedies of great service in many cases, and are indicated by high arterial tension and cephalic congestion, shown by incompressibility of the pulse and flushing of the face. Venesection is successful *only* where the heart acts strongly and the *pulse full* as well as incompressible. A drop or two of *croton oil* in glycerine is the most useful purgative. With a failing heart and pale surface, both venesection and *active* purgation are to be avoided. Diuretics may always be used to relieve the vascular tension. Counter-irritation applied to the nape of the neck will be of some benefit, but only of marked service in a few cases.

3. There is no symptom more alarming than the convulsion. It begins with a distortion of the countenance, due to clonic contraction of the muscles of the face, and in a few minutes the entire voluntary muscular system is involved. The victim of convulsions rapidly becomes unconscious and falls heavily to the floor. The fall itself may be the cause of serious, and even fatal injury.

The convulsion is found as a symp-

tom in many diseases, as hysteria, epilepsy, Bright's disease, eclampsia, tetanus or peripheral irritation. Again, convulsions may be a *symptom of poisoning* or organic disease of the brain.

In the treatment of convulsions, no matter what the cause may be, *Nitrate of Amyl* is the most efficient remedy we have; however, its use would not be advisable in puerperal convulsions, as it might produce dangerous hemorrhage (flooding). Chloroform is one of our most powerful remedies, and is probably used more frequently in the treatment of convulsions than any other drug. Treatment has little if any effect, if the convulsion be due to *epilepsy*. If due to *reflex irritation*, as an overloaded stomach (a frequent cause of convulsions in children,) an emetic should be given; it is also advisable that a movement of the bowels be brought about by an enema. In convulsions due to *Bright's disease*, chloroform should be inhaled, or chloral given by enema. Pilocarpine is a good remedy, but should not be used in convulsions occurring during pregnancy. In convulsions due to *hysteria*, douching with a liberal quantity of cold water will usually be successful, and all the treatment that is needed. Passiflora and scutellaria are remedies that should always be remembered, especially in the after treatment of convulsions.

4. The most frequent forms of hemorrhage that we are called upon to treat take place; from the lungs, nose, stomach and urinary track.

Hemorrhage from the lungs is one of the most frequent and early symp-

toms of phthisis. Hemorrhage in the early stages of tuberculosis is rarely profuse, and it often gives great relief from dyspnoea due to congestion. Hemorrhage in the later stages of phthisis is much more serious, and it not infrequently proves fatal. It is usually due to a neurotic division of vessels in the course of softening of the tubercular consolidation.

As to treatment, ABSOLUTE REST is the first thing to be observed in all attacks of hæmoptisis. Of internal remedies, alum, dilute sulphuric acid, common salt, hamamelis, ipecac, gallic acid, or ergot are the ones most frequently used; but in oil of erigeron, oil of cinnamon and oil of turpentine we have the most *powerful and certain astringents*, and they should be given the preference. Digitalis is of great value, especially in those cases where the circulation is greatly excited.

Nasal hemorrhage can usually be controlled by snuffing cold water or some astringent solution up into the nose. In severe cases plugging the nares must be practiced.

Hemorrhage from the stomach occurs in a variety of morbid conditions. It is due, in a majority of cases, to *ulcer of the stomach*. When treatment is required, gallic acid, hamamelis, ergot, turpentine, dilute sulphuric acid or alum may be used; acetate of lead in 2-gr. doses is also a useful remedy. All food should be forbidden, but pieces of ice may be given the patient to suck. After the cessation of the hemorrhage, sulphate of magnesium is useful to relieve venous congestion. Hemorrhage from the *lower bowel* is

best treated by quiet, and cold compresses. Tannic acid in large doses may be of benefit.

Hemorrhage from the urinary tract is due to many morbid conditions. When present in the urine in very small quantities, the *Guaiacum* test should be used, especially if the diagnosis be in doubt. The test is as follows: Equal parts of simple *tincture of guaiacum* and *oil of turpentine* are shaken together to form an emulsion, and when the urine is cautiously added an *intense blue color* is produced if blood be present. This test is much more convenient than is the test by spectrum analysis. The remedies used in the treatment of hemorrhage from the stomach are also to be used in hæmaturia.

5. The term *asphyxia*, though literally signifying pulselessness, is generally understood to mean the condition that supervenes on interruption of the function of respiration. The heart continues to beat after the cessation of respiration, and the successful results obtained from treatment in many of these cases depends upon this fact. Resuscitation from pure asphyxia is possible so long as the heart continues to beat. After the heart has ceased to act, treatment is unavailing, except in cases due to mere over-distention; in these, bleeding from the external jugular vein may be resorted to with success. The first indication to be met in these cases is to supply *oxygen*. If the air passage be obstructed by a foreign body, it must be removed; if this is impossible, *tracheotomy* should be performed. Respiration should be ex-

cited by *artificial means*, if possible. The alternate dashing of hot and cold water is often of marked benefit. If the asphyxia be due to gas, the patient should be removed into the open air. In cases apparently drowned, the diaphragm may be stimulated to contraction by galvanization of the phrenic nerve, one pole being placed on the nerve as it crosses the scalenus anticus at the root of the neck, the other on the epigastrium.

6. Accidents due to persons coming in contact with electric wires or apparatus are quite frequent, and the following points as to treatment may be of some value:

In all cases the contact with the electric current must be broken, if it still exists; otherwise, those trying to render assistance may also become victims of the same accident. The patient should be carried into the open air or into a well-ventilated room. The clothing should be freely loosened and

efforts made at once to re-establish respiration and circulation. In restoring respiration, artificial means should be employed and continued for some time. The circulation is best stimulated by rubbing of the skin, flagellations of the trunk with the hand or wet towels. The patient must not be allowed to become chilled by remaining in the open air or a cold room too long. Warm applications and strychnine may be of some value.

Old Mrs. M——, who was seriously ill, found herself to be in a trying position which she defined to a friend in these words: "You see, my daughter Harriet is married to one o' these homypath doctors and my daughter Kate to an allypath. If I call in the homypath my allypath son-in-law and his wife git mad, an' if I go ahead an' git well without either of 'em, then they'll both be mad; so I don't see but I'd better die outright."—Detroit Free Press.

Hydatid of the Liver.

JOHN FEARN, M. D., Oakland, Cal:

Last August I was called upon to see a lady aged over 70 years. For some years she had been my patient and her sicknesses, which were not frequent, were chiefly caused by constipation and difficulties of a rheumatoid character. On this occasion I found her suffering with fever, vomiting, and severe pain in the bowels, chiefly located in the right hypochondrium and

right lumbar regions, which was increased by pressure. In the right side could be very easily located a tumor extending in the course of the ascending colon; and to myself and another physician the difficulty seemed to be impaction of the colon. When I prescribed a large enema of hot water and glycerine the objection was made that they could not pass fluid



into the bowels; however, on following out my instructions as to giving the enema, they succeeded, and a very copious movement followed. Other remedies were prescribed as indicated, the vomiting ceased, temperature fell, and pain was much relieved. But on account of age and general debility the patient passed away in a few days. I requested an autopsy, which was readily granted. On opening the abdomen there was found to be some enteritis, the omentum was much diseased and was apparently being rapidly absorbed; in some places most of it was gone, only a little island being left in the midst of a bare spot. It was much off color, being a dirty yellow, and of a pronounced bad odor, so that it seemed almost impossible to disin-

fect or deodorize my hands. In addition to this, what had been mistaken for an impacted bowel turned out to be a large hydatid of the liver extending down the right side and which, no doubt, during life, had been a principal cause of obstruction to the bowels.

This case is another argument in favor of after-death examinations. In this case, had we known the exact condition, it would have made no difference in the treatment, as in her condition only palliative treatment was admissible.

What led to the perpetration of the error in diagnosis was the fact that after the bowels had been evacuated the tumor seemed to be smaller and softer.

Professor Bundy's Grave.

H. T. WEBSTER, M. D., Oakland, Cal.

One of the deserving investigators in therapeutics who has lived and died during the present rapidly closing century was Professor Joseph Horatio Bundy. Though an enthusiast, his investigations into the medical flora of California have been followed by important advances in our ability to cope successfully with disease, and several of the remedies which he introduced promise to some day take front rank in the Eclectic materia medica.

Bundy cared little for fame and emolument, and it mattered not to him that these were denied by his contem-

poraries. Many regarded his statements as visionary, and some suspected him of mercenary motives, or of seeking an unstable notoriety through his innovations. But time has proven such estimates as completely false. He stood head and shoulders above his critics in purity of purpose and prosecuted his studies largely if not entirely from a pure love of the vocation, with little thought of the results. And now it remains for posterity to see that honor is given him for his good deeds.

The greatest compliment that can

be given the memory of Bundy is the extensive use that has been made, by all classes of physicians, of a single agent he introduced to the notice of the profession — *berberis aquifolium*. And yet but few of these realize the wide scope it possesses as a curative agent. Still, I believe that he has called attention to another which will some day be used much more extensively, and for more specific purposes (if possible).

There have been many followers, but few leaders. Unfortunately, envy usually rules where important discoveries are made, and most contemporaries prefer to belittle or ridicule honest effort rather than award just praise. Benefactors usually receive their reward after death, and so it must be with Bundy. During life tardy justice failed to mete out to him very high praise for his work. Though many recognized the value of his labors, even among his compeers his superior qualifications were but coldly acknowledged. To criticize the man and question his methods seemed the rule for measuring his many virtues.

Bundy sleeps in a neglected grave. Stricken with an incurable and painful cardiac disease, he used the bulk of his small property seeking without avail, a locality which might afford relief and, finally, as a last resort, with the meagre gleanings of his remaining funds he went to Seattle, where he died suddenly and unexpectedly, leaving his widow in Oakland so much embarrassed financially that she was compelled to consent to have the remains interred where he died, far from home. And there

they lie, without a headstone. An old family friend, who resides at Seattle, who had known them formerly in the East, knows where he lies, and can point out the spot, but Mrs. Bundy has never possessed the means to visit it. Even the burial expenses were met by the few who rallied round the fortunes of the California Medical College in its early and trying days.

There is a question which often arises in my mind, and it is this: Shall the remains of Professor Bundy pass into oblivion for the need of a headstone to mark their last resting place, or shall a decent slab of marble be provided by the Eclectic profession to indicate, to future admiring and reverent worshipers at the shrine of true greatness, the spot where they lie? Bundy was an Eclectic, and upon the Eclectic school must rest the responsibility of the neglect, if neglect there be. There is no doubt that in coming time abundant contributions will be forthcoming to provide lavishly for the required purpose, for his services will be better and better appreciated, as time wears along. But, meanwhile, will not that time destroy the opportunities which now exist for identifying the exact locality where the remains rest?

An imposing monument is not to be desired. The principal object should be to provide a lasting mark which time will not speedily efface. The identity of one mound among several others soon becomes lost, and, as few now (if more than one) can point out the exact place of sepulture, only a short time more may be necessary to

sweep away all positive knowledge of the spot.

I have written these lines that the readers of OUR JOURNAL may consider whether or not it is best to combine small individual effort for a worthy purpose. Have so many truly worthy ones of our cause gone before who are greater, that we cannot afford to pay some slight tribute to the memory of Bundy? I did not know him personally, but the work he did for Eclecticism, for the whole profession, and for humanity at large, keeps his memory green for me.

*Department. Eye, Ear,
Nose and Throat.*

CONDUCTED BY PROF. CORNWALL.

The plan of work outlined below by Prof. Cornwall meets with the hearty approval of Our Journal, and we trust our physicians of the Coast will take an active interest in this department.

MR. EDITOR;—Your note is received in which you suggest that it is time that I write something for the Journal. If desirable, I will write each month under a heading, "Eye, Ear, Nose and Throat," conducted by myself, providing such a department is created in the Journal. The matter for this department will consist of brief notes of practical interest in which I shall invite the co-operation of any and all the Journal subscribers. Cases of the most extraordinary interest fall into the hands of the general practitioner frequently, and if reported to me I will, to the best of my ability, assist

the writer by giving explanations of what to him may not be understood.

TWO CASES OF FUNCTIONAL AMBLYOPIA IN YOUNG GIRLS, IN WHICH THERE WAS RAPID RECOVERY UNDER TREATMENT:

The first case was the child of one of our leading physicians, aged about 8 years. Vision, in a few weeks, had gone down to what oculists call 20-200, i. e., letters that ought to be read at 200 feet could just be distinguished at 20 feet. This was alarming. The child was enjoying fair health, was not anemic, nor was there kidney disease or apparently any other disease to which the eye trouble could be attributed. The only extraneous cause to which this eye affection could be imputed was overwork in school.

The optic papillæ were unmistakably pale, but not atrophied. The child was taken from books and put upon strychnia and galvanism, and in three weeks, up to the date of this writing, has regained over half of the vision lost. Complete recovery is expected inside of a month.

Case 2 is a College clinic. The girl is about 8 or 9 years of age, a little anemic, poorly nourished. Vision was lost to the extent of the first case, viz: 20-200. There was no history of overstudy, and the amblyopia had been getting worse for a period of a month, as near as known by the mother. The optic papillæ were pale, as in the former case. Strychnia was prescribed, and in three weeks vision was normal.

Remarks.—Just to what extent treatment was the cause of recovery of these cases can only be conjectured. In all probability either case might

have recovered without any treatment, but it would have been a dangerous experiment to have relied on the expectant method. Strychnia has a well-known action when there is anemia of the optic nerve, whether this occurs from organic lesion or from functional disturbances. Galvanism also is the most reliable remedy in any case of paresis, both in removing the cause and restoring functional activity to the nerve.

PHORIA.—This is a Greek word and signifies leaning, and is applied to affections of the muscles of mobility of the eye. These affections differ from strabismus in this: that in the former there is binocular vision; that this is maintained by more or less muscular effort, inasmuch as the place of rest of the two eyes is not so that their visual lines are parallel when looking at distant objects, while in the latter there is no attempt at binocular sight. These affections (phorias) of the muscles used to be known by the term insufficiency of the interni or externi, etc.; but Dr. Stevens of New York, to whom we may give credit as the first investigator in this line, gave the name as above. When the eyes have a tendency to divergence of their visual lines it receives the name of Exophoria; when the leaning is inward, Esophoria, etc.

There is no little suffering occasioned by these muscular irregularities, and no doubt conditions of many of the physicians' patients that seem inscrutable might be understood and cured through the modern treatment of them. European oculists and many

of the older ones in America ignore the methods of Stevens and his followers, but from my experience they are behind the times.

If any one of the Journal readers desire practical information of this subject, let him address his inquiries to this department.

Medical Societies.

The State Society.

DEAR DOCTOR:—The twenty-fourth annual meeting of the State Society will be held at California Medical College Hall on the 18th and 19th of November. The hour of convening will be 10 A. M. on Wednesday, the 18th.

A very interesting program is here presented, and every Eclectic physician should do his utmost to be present. A strong organization is desirable. Mankind respect force, and despise weakness and cowardice.

You are expected to make a sacrifice for your future benefit and for the benefit of others. The physician who will not assist his State Society is unworthy the privilege of its protection which he craves when he applies for license to practice his profession. He is the mistletoe of medicine, who takes advantage of the labors of others without assuming any of the burdens or responsibilities.

Alumni of the California Medical College should let no excuse stand in their way. Help your State Society—help your College, and you will help yourself. Come and show that you appreciate the work done by your

teachers and that you are progressing. Give them an opportunity to congratulate you on your success and advise you in your failures. Come. Fail not.

SECTION I.

Practice of Medicine.

Chairman—R. Musgrave, M.D., Hanford.

Vice-Chairman—H. T. Webster, M. D., Oakland. (Special Therapeutics in Pneumonia.)

R. T. Hyde, M. D. (The Woodbridge treatment of enteric fever.)

M. H. Logan, M. D., San Francisco. (Phthisis.)

G. P. Bissell, M. D., Cedarville. (Effect of altitude on weak heart.)

L. F. Herrick, M. D., Oakland. (Malarial fever.)

Florence V. Wall, M. D., Valley Springs. (Rhus Tox poisoning.)

SECTION II.

Materia Medica.

Chairman—J. V. Coombs, M. D., Grass Valley. (Dynamics and cellular theory of food, medicine and poison.)

Vice-Chairman—John Fearn, M. D., Oakland. (Daucus Pusillus.)

C. H. Wheeler, M. D., Sisson. (Rhus Tox.)

M. B. Mallory, M. D., Los Gatos. (A physician's relations to the materia medica of morals.)

G. P. Bissell, M. D., Cedarville. (Thuya Occidentalis in rheumatism and neuralgia.)

James Stark, M. D., Oakland. (Dry cupping.)

C. J. Sharp, M. D., Oakland. (Therapeutic notes.)

SECTION III.

Surgery.

Chairman—G. G. Gere, M. D., San Francisco. (Cosmetic.)

Vice-Chairman—M. E. Van Meter, M. D., San Francisco. (Report of special work at the Maclean Hospital.)

W. O. Wilcox, M. D., San Francisco. (Operating for lithotomy; Clinical.)

W. B. Church, M. D., Oakland. (Surgical tuberculosis.)

SECTION IV.

Obstetrics.

Chairman—A. Wellman Bixby, M. D., Watsonville. (Synopsis of four hundred cases in obstetrics; management and treatment.)

Vice-Chairman—E. H. Mattner, M. D., San Francisco. (The action of chloroform in parturition.)

A. E. Colerick, M. D., Pacific Grove. (Hints on obstetrics.)

SECTION V.

Gynecology.

Chairman—J. W. Hamilton, M. D., San Francisco. (Vesico-vaginal fistula.)

Vice-Chairman—H. C. Turner, M. D., Pomona. (Ovaritis.)

Belle Peery, M. D., Tehachapi. (Treatment of dysmenorrhea.)

M. E. Van Meter, M. D., San Francisco. (Surgical gynecology.)

SECTION VI.

Pediatrics.

Chairman—C. H. Wheeler, M. D., Sisson. (Infantile dysentery.)

Vice-Chairman—A. E. Scott, M. D., San Francisco. (Infantile rheumatism.)

John Fearn, M. D., Oakland. (Infantile colic.)

SECTION VII.

Nervous Diseases.

Chairman — F. P. Mitchell, M. D.,
Redding. (Spinal concussion.)

Vice-Chairman—C. N. Miller, M. D.,
San Francisco.

C. G. George, M. D., Redding. (Chorea.)

SECTION VIII.

Ophthalmology, Otology and Laryngology.

Chairman — F. F. Kelleghan, M. D.,
Santa Barbara. (The mucous membrane and skin; their relation and care.)

Vice-Chairman—F. Cornwall, M. D.,
San Francisco. (A review of ophthalmology for the past year.)

H. W. Hunsaker, M. D., San Francisco.
(The effect of nasal diseases on the eyes.)

SECTION IX.

Electro-Therapeutics.

Chairman — F. Fay, M. D., Sacramento.
(The Cathode Ray.)

Vice-Chairman—O. L. Jones, Oakland.
(The value of electricity as a therapeutic agent.)

A. A. Leonard, M. D., Nestor. (Electricity with massage.)

G. T. Van Voorhees, M. D., White River.
(Electricity in practice—what it has done and will do.)

J. R. Buchanan, M. D., San Jose.
(Therapeutic electricity.)

O. S. Laws, M. D., Los Angeles. (Value of electricity to the general practitioner.)

J. M. Bond, M. D., Hanford. (Electro-therapeutics.)

* F. O. Haussler, Oakland. (X-ray clinic.)

SECTION X.

Special Topics.

Chairman—G. W. Burleigh, M. D.,

Los Angeles. (Southern California as a health resort.)

Vice-Chairman—W. B. Church, M. D.,
Oakland. (Some forms of heart disease.)

C. M. Freeman, M. D., Stockton.
(Medical legislation.)

J. C. Andrews, M. D., Los Angeles.
(The modern physician.)

* Result of examinations by the fluoroscope and radiograph as shown by means of vibrating currents with a Ruhmkorf coil, compared with high-tension oscillating currents with apparatus of the Teshler type, the most powerful on the coast.

D. MACLEAN, M. D., President.

B. STETSON, M. D., Secretary.

A PHILOSOPHER'S DEATH. Jules Simon was as modest as he was able. He had often expressed the wish that there might not be too much laudation around his tomb. He had also mentioned a desire to be told when death was approaching. A friend fulfilled this sad duty. The philosopher showed no signs of emotion or fright on hearing the terrible news. As he could no longer speak, he motioned for a pencil and a piece of paper, and with a steady hand wrote his own epitaph: "Jules Simon—1814—1896. *Dieu, Patrie, Liberte*;"—his name, the year of his birth and the year of his death, and the beautiful motto that had commanded and ruled his whole life: "God, Country, Liberty."—Baron de Coubertin in October Review of Reviews.

Take advantage of the offer of the Hall Capsule Company. See add.

Alumni and Personal.

DR. DORA M. HAMILTON, Editor

Communications for this department should be addressed to its Editor, 1422 Folsom Street, S.F.

Come one, come all to the State meeting, and incidentally to the meeting of the Alumni Association. We hope to have an interesting gathering, and we want all within reach to come and help make it so.

Professor Maclean is doing everything possible to make the next meeting of our State Society one of the most profitable that has ever been held. There will be some splendid papers prepared, and it means for those who hear them a broader field, more successful practice, more liberal spirit and more satisfying credit entries in the bank book.

This month is a "dry one" for news, for, of course, you are all expecting to interview the editor in person, when we come together. Let us have a full alumni meeting—not of members who are "full," but a meeting full of members.

This month brings us to the Class of '85. The class is small in numbers, but from the character and success of the members with whom we are acquainted, makes up in quality what it lacks in quantity.

CLASS OF 1885.

Chas. S. Clark, M. D., Arroyo Grande, Cal., practicing.

Clara M. Freeman, M. D., Stockton, Cal., practicing.

R. E. McDonald, M. D., San Bernardino, Cal., practicing.

Frank P. Mitchell, M. D., Redding,

leading physician of Redding, where he has been established since his graduation.

H. B. Mehrmann, M. D., Oakland, Cal., successful in practice and Professor of Hygiene in C. M. C.

It was with great pleasure we noticed the return of Professor Fearn to the lecture-room of the College. The Professor was severely hurt by a runaway team last year in Oakland, sustaining great injury to the spine. Although he is not fully recovered, yet he feels he cannot longer neglect his duties as Professor of Materia Medica in the C. M. C. The students join with Our Journal in welcoming Prof. Fearn back to the college and wishing him a speedy return to perfect health.

Dr. O. F. Lee, of Marysville, Cal., sends his autograph appended to a pretty little slip of paper such as now and then, but all too seldom, gladdens the vision of the Manager. Thanks, Doctor.

C. A. Burleigh, M. D., Forest Hill, Cal., also sends a picture card—one of the kind the Manager is looking for as assiduously as the small boy for election cards. Charlie, may your shadow never grow less.

S. L. Lee, M. D., Carson, Nev., a member of the State Board of Health, remembers Our Journal with kind words and a check. Thank you, Doctor.

C. H. Wheeler, M. D., Sisson, Cal.,

is on hand with just a plain money order. Well, Doctor, there's beauty in utility, and a money order is exceedingly useful. The Manager will remember you gratefully for this. "Many a mickle makes a muckle." Next,

We learn from a friend of Dr. Daley, '95, that he is located in Porterville and is doing a good business. We are very glad to hear of the Doctor's success.

T. F. Kelleghan, M. D., '95, of Santa Barbara, is in this city. Dr. Kelleghan intends visiting his old home in the mountains and returning to San Francisco in time to attend the State meeting.

LA GRANGE, CAL., Oct. 22, '96.

DEAR EDITOR:—Having left Pacific Grove, as the busy season there has closed for the summer, I have located at La Grange, twelve miles from Snelling, where I have Dr. Cassity as a co-laborer. This is a mining town, and business is very good. Have been here since Sept. 1st. Please have Journal address changed. Wishing Our Journal and our College prosperity, I remain, yours respectfully,

J. A. MOFFITT, M. D.

With Dr. Moffitt's letter was inclosed a few valuable notes from his practice which will appear in our next issue. Why not all of our alumni do likewise?

We clip the following from the Los Angeles *Daily Times*: Dr. J. A. Munk of this city returned yesterday from the East, where he was in attendance

at the National Encampment at St. Paul, Minn., and also visited in Des Moines, Ia., Chicago, Ill., Pittsburgh, Pa., and other places.

POMONA, CAL., Oct. 22, '96.

DEAR JOURNAL:—I send you herewith spondulix to apply on subscription to Our Journal. Please give credit and send receipt.

Our Journal is all that is claimed for it—alive and wide awake—just such a helper as a busy physician needs in practice. Hurrah for Our Journal, Eclecticism and McKinley! Respectfully,

J. N. HUGHEY, M. D.,

Graduate of A. M. C., St. Louis, Mo.

CLEARMONT, MO., Oct. 22, '96.

DEAR EDITOR:—I wish you to change my address from Pomona, Cal., to Clearmont, Mo. Business called me East, and I will remain here for a time at least. Wishing you continued success, I am fraternally,

W. L. BUSBY, M. D.

Formacoll.

This preparation promises to be a very popular antiseptic. Dr. C. L. Sleich, a celebrated surgeon of Berlin, writes concerning it:

"It is possible with the aid of this powder to check every acute suppuration and guarantee for every wound an aseptic course without any further precautions. I have substantiated this in 120 cases of acute purulent processes, 93 aseptic wounds, 4 complicated fractures and 2 deep scalp wounds."

Prepared in a most elegant form by C. E. Worden & Co., San Francisco.

CALIFORNIA : MEDICAL : JOURNAL.

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DR. C. N. MILLER, Managing Editor.

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Expression is essential to growth. We cordially invite all Eclectic physicians who would keep abreast with the times to make frequent use of our columns.

To insure accuracy, employ the typewriter when possible. Otherwise prepare manuscript with care, re-writing when necessary; be kindly thoughtful of the Editor and compositor, and do your own drudgery—time is money.

This JOURNAL will be issued on the first day of the month.

Let all communications be addressed, and money orders made payable to the

CALIFORNIA MEDICAL JOURNAL.

1422 Folsom Street,

San Francisco, - - - California.

*Editorial.***State Society Meeting.**

No business can flourish without systematic organization. He who allows his affairs to drift along without active supervision will be a failure. An individual cannot contend against disciplined force. Neither can we as a school of medicine expect to progress and maintain our prestige unless we combine under one flag—the State Society. This is the time to make one grand effort and place ourselves shoulder to shoulder with a determination to push our school on a plane that even our enemies would feel bound to respect.

Doctor, you may be busy, but you owe it to your school and to yourself to be present at the annual meeting.

Numbers give strength and united action carries weight. We have been unjustly treated in the past; we must now demand justice in the future. It is time we had representation in the public institutions in the State, and we will have it by a united representation of our case. Taxation without representation is not an American doctrine, and we have only been debarred by usurpers of authority contrary to the fundamental principles of our government. Come and help us along.

MACLEAN.

A Prediction.

Nov. 1st, 1896.—On the eve of a great election contest, without party prejudice, and guided by the teachings of history and the demands of wise political economy, we predict an overwhelming vote in favor of sound money,

On Tuesday our country and practically all mankind will mount to a clearer atmosphere, to a higher level and a broader plane. We shall reach a new era in civilization. We shall climb the golden stairs.

Tuesday's verdict will establish the fact that the world has outgrown silver. Hereafter its free mintage by the great nations of the earth will never more be thought of. Political reforms will be fought out and wrought out without questioning the principle that financial schemes must rest somehow, however deep down it may be, upon a gold basis.

These are history-making days. Our Journal hopes that for our country the result may be a bright silvery realization of golden promises.

Our Frontispiece.

Dean of the E. M. I.

Frederick John Locke, M. D., was born in the city of London, England, on the 7th of December, 1829. Was educated at Christ's College, Newgate street, in the same city; read medicine with Dr. Edwards, Blackfriars Road, London. At the breaking out of the Civil War in this country he was practicing medicine in Waverly, Pike county, Ohio. Entered the service August, 1861, as captain of Company D, 23d O. V. I.; was promoted to major March 23, 1862, and to lieutenant-colonel July 16th in the same year. In 1864 he graduated at the Eclectic Medical Institute, Cincinnati, Ohio. Practiced medicine in Newport, Ky., since 1864. Was City Physician of Newport for six years, having charge of the city hospital, jail and all outdoor poor; was appointed Professor of Materia Medica and Therapeutics in the Eclectic Medical Institute in 1871, which chair he has since held with great credit to himself and the important branch of materia medica and therapeutics. He resides in Newport, Ky. On the death of Prof. Scudder in 1864 he was chosen Dean of the Eclectic Medical Institute. In 1895 he published a work entitled "Syllabus of Eclectic Materia Medica and Therapeutics," which has met with a large sale.

Subscriptions Due.

So many subscriptions are unpaid for '96 that it seriously cripples our work. We have recently sent out a good many statements of accounts to

our patrons in arrears, and it will be highly appreciated if all will kindly give the matter early attention.

A Dastardly Deed.

The cruel assassination of the secretary of the New York Pharmacal Association while at his desk, by means of a dynamite bomb, as reported by the daily papers, was a most revolting murder.

It is to be hoped the assassin will be quickly caught, and suffer the only punishment commensurate to the deed—the death penalty. The New York Pharmacal Association is widely and favorably known to the medical profession, and they will receive the heartfelt sympathy of the entire fraternity.

M. A. Flinn, M. D., Professor of Physiology, medical department of the Oregon State University, has been visiting San Francisco, and took the occasion to call on several members of our College staff. Prof. Flinn is a genial man, of broad views and highly cultured, and wherever he goes always finds warm friends and a hearty welcome.

The Laryngoscope.

By referring to our adv. pages it will be seen that we offer a great opportunity to secure this new journal at club rates. Send in the orders.

Anderson's Vaginal capsules or tampons; always ready, elegant and efficient. Furnished in all sizes by the Hall Capsule Co., Cincinnati.

MACLEAN HOSPITAL AND SANI-
TARIUM.

Monthly Report of Cases Recieved.

Dr. M. H. Logan, Oct. 1.—Mrs. W.;
trachelorrhaphy; operation Oct. 3.

Dr. G. G. Gere, Oct. 10.—Mrs. S.;
amputation head femur; operation Oct.
29.

Dr. G. G. Gere, Oct. 14.—Mrs. B.;
ovarian tumor; operation Oct. 17.

Dr. A. E. Scott, Oct. 15.—Mrs. T.;
operation Oct. 16, rectal; discharged
Oct. 19.

Dr. G. G. Gere, Oct. 16.—Mrs. McC.;
extra-uterine pregnancy; operation
Oct. 19.

Dr. Lewis, Oct. 21.—Mrs. E.; typhoid.

Dr. M. H. Logan, Oct. 16.—Mr. M.;
varicocele; operation Oct. 24.

Dr. G. G. Gere, Oct. 22.—Mrs. G.;
curetting; operation 23d; discharged
Oct. 29th.

Dr. Bracket, Oct. 22.—Mr. S.; or-
chitis; discharged Oct. 29.

Dr. D. Maclean, Oct. 24.—Mrs. W.;
submucous tumor of uterus; operation
Oct. 25.

Dr. M. E. Van Meter, Oct. 25.—Miss
B.; fibrous ankylosis of knee; opera-
tion Oct. 25.

Dr. A. E. Scott, Oct. 26.—Miss L.;
operation Oct. 29 for floating kidney.

Dr. E. H. Mattner, Oct. 27.—Miss S.;
alcoholism; discharged Oct. 30.

Dr. E. H. Mercer, Oct. 30.—Mr. F.;
amputation of toes; operation Oct. 30.

The State Medical Association and
their friends are to be tendered a re-
ception and banquet by the Maclean
Hospital at their new home, Cor. of
Douglas and Caselli Ave., on Thursday
the 19th. of November 1896, at 8.30 P.M.

Publisher's Notes.

**"Formacoll," the New Antiseptic—Home
Product.**

In the realm of surgery, Dr. Sleich's
new method of wound antisepsis has
attracted considerable attention during
the past few months. We are pleased
to note that Messrs. Clinton E. Worden
& Co., the enterprising manufacturers
of chemicals and pharmaceuticals of
San Francisco, have issued a complete
translation of Dr. Sleich's papers on
formalin and gelatin as an adjunct to
their product, Formacoll.

They undertook the manufacture of
Formacoll at the earnest request of
leading surgeons, so as to insure an
abundant supply of the remedy within
reach. They have thoroughly mas-
tered the subject, and turn out a prod-
uct at once elegant and superior to
the imported article. The latter is
very coarse and put up in pasteboard,
while Worden & Co.'s product comes
in securely sealed glass-stoppered vials.
It has been sterilized and can be em-
ployed at once without any prelimina-
ries. The manufacturers claim that it
can be dusted upon wounds without
producing any pain, while the imported
article, owing to its coarseness, is apt
to irritate, especially on large sores.

The price, we understand, is less
than the imported — another reason
why the home product should have
preference.

A well-equipped office is the doctor's
pride and his guarantee of success.
N. W. Mallery has what you need.
Crocker Building, San Francisco.

Hall Capsule Co.

The useful and elegant preparations of this company are of the greatest convenience to the physician. To waste time in making tampons of the hard, soggy, absorbent cotton when the elastic, non-irritating, ever-ready tampons of all sizes furnished by this company can be had so cheaply and promptly, is like going back to the days of roots and herbs and refusing to patronize the modern drug store.

Electricity.

A doctor's office should be equipped with apparatus for the use of Farradism, Galvanism, electro-cautery, electrolysis, and a lamp for examinations. This little plant can be had of the Union Iron Works, San Francisco, on reasonable terms.

Thermo-Cauteries.

A portable thermo-cautery can be had of F. Drumm, 43 Park street, New York. He will also supply you with a complete outfit for office use. Write for terms.

Physicians' Supplies.

N. W. Mallery, Crocker building, San Francisco, can supply you with anything, and only asks in exchange a minimum quantity of good coin of the realm. We speak from recent experience. Try him.

My patients prefer the "Waterhouse" Uterine Wafers above any other treatment they have ever tried, and the results in over three years' use have been entirely satisfactory.—D. Lash, M. D., Alosta, Cal.

The Waterhouse Uterine Wafers are doing good work.—J. A. Fields, M. D., Sedalia, Ohio,

Try our Uterine Wafers. Best of all. See adv.

A Palatable Remedy.

Malto-Fer (Worden) is acceptable to the most fastidious patient. It is free from the unpleasant bitterness usually associated with cinchona, and void of any ferruginous taste. It does not constipate but stimulates the digestive functions, and relieves the fulness frequently experienced after meals.

Worden & Co., San Francisco, manufacturing pharmacists, have one of the most complete plants in the country. They supply the physician with everything he needs; fresh, reliable and elegant. Send for a catalogue.

A Model Vehicle.

We frequently see prescriptions for intertrigo or other cutaneous inflammation, in which starch figures prominently. There is no sort of question that in many such cases starch is positively injurious. Where there is exudation to any extent (and in how many cases of intertrigo is it not present?) the starch "cakes" and undergoes fermentative processes, and so does actual harm. Talcum should be the principal part of every dusting powder, whether for protective purposes or to allay an existing irritation, and, indeed, is generally the only agent needed. It is also the preferred vehicle for all dry antiseptic dressings, while for the toilet, in the nursery, or for ordinary chafed-skin cases, nothing could possibly be better. In thus speaking, of

course we do not mean the ordinary commercial talcum powders, but the purified product, and the finest of them all, indeed, the standard of purified talcum, is Fehr's Compound Talcum. The writer uses no other. No other will give the same uniform results.—
The Mass. Med Journal.

Spermatorrhea.

Having a case of spermatorrhea of several years' standing, which came under my care about nine months ago, I prescribed the usual remedies in this case, viz., bromide potash, ergot, ferum, digitalis, belladonna and cimicifuga, with very unsatisfactory results. Seeing your preparation, Celerina, recommended for this affection, I procured some and administered it in this case with such marked results after the use of the first bottle, that I immediately ordered two more bottles, which have entirely cured him of this affliction. I have two other patients now under treatment with Celerina who are progressing very favorably. After a practice of twenty-nine years I have no hesitancy in saying that it is the most effectual remedy that I have ever prescribed in the above disease.—H. E. Raub, M. D. Quarryville, Pa.

Neuralgia, Hysteria, Asthma, Spermatorrhea.

NEURALGIA.—The varieties of neuralgia are almost as numerous as the nerves of the body. Wherever there is a nerve there may be pain. In almost every form, Neurosine will be

found to give prompt relief, and if persevered with in the intervals of the attack, the splendid effects of the bromide of zinc and cannabis indica as permanent nerve tonics and other bromides as alteratives may be confidently expected.

HYSTERIA.—The manifestations of hysteria are so infinite in number that Tanner has well said, "Hysteria simulates almost every known disease." It so often exists without any pathological lesion and persists after cure of the lesion, that the practitioner has no resource but the well-known anti-spasmodics, anodynes and nerve tonics, which should only be taken at his direction and which alone in many cases intervene to save the sufferer from the too common resort to opiates. Here Neurosine not only gives prompt relief but offers the best means of cure.

ASTHMA.—The bromides, belladonna and cannabis indica have been, and still are, the sheet-anchors in this common and distressing malady. Trousseau and others after him was wont to push belladonna to the limit of toleration in asthma, and thus he secured results equaled by no one of his time. A combination of these always efficient agents in Neurosine has in this disease given more satisfactory results than any other known remedy.

SPERMATORRHEA, SELF-ABUSE, NEURASTHENA, ETC.—The results in this class of cases, annoying alike to the physician and patient, are well expressed by a physician eminent in his work, who says: "Your Neurosine has given me at least satisfactory results which will warrant me in a further use of it."

Antikamnia.

Albert M. Williams, A. M., M. D., of Bradford, Pa., says: "I have used antikamnia in my practice since its first introduction and used it extensively. At first I was a little cautious and a little apprehensive, and rarely ventured on doses larger than five grains; but for several years I have given it in ten and fifteen grain doses to adults, and when needed, repeating every two hours. I have rarely been disappointed in controlling pain, if the pain was of a character to be controlled by medicine. In severe neuralgia or any severe form of pain my method is to prescribe ten grains to be given every hour till the pain ceases. I seldom use morphia or opium in any form. I have seen so many unfortunate victims of the opium habit that I shun its use, and antikamnia is my sheet-anchor. The effects of opium and its alkaloids too, are most disagreeable to many people. I always suffered untold misery when I had taken even a small dose of morphia; itching and nausea especially continuing for about two days. There is none of this following the use of antikamnia, and I have never heard of a victim of the antikamnia habit. I have yet to see the first case where any alarming symptoms have followed its administration. I have for a long time been in the habit of prescribing it in a little larger doses than are recommended, and any bad results from its use must be due to some idiosyncrasy on the part of the patient."

We are in receipt of the announcement of the Brooklyn Post Graduate Schools of Electro-Therapeutics, 865 Union street, Brooklyn, N. Y. Physicians intending to study in the East this winter will do well to consult their catalogue.

Book Notes.

A MANUAL OF NERVOUS DISEASES and other Homœopathic Treatment. A Compend for Students and Physicians. By George H. Martin, M. D., Professor Mental and Nervous Diseases Hahnemann Hospital College, San Francisco. Medical Century Co., New York and Chicago.

The author has arranged his work into eight parts: Anatomy and Physiology of the Nervous System; Symptomatology; Diseases of the Brain and Its Membranes; Diseases of the Cranial Nerves; Diseases of the Spinal Cord and Its Membranes; Diseases of the Muscles; Diseases of the Spinal Nerves, and Fundamental Nervous Diseases.

In each part the essentials of a practical working knowledge are clearly and concisely given. The book is not intended to supplant the larger textbooks on the subject, but it will take the place of the quiz-compend for the student, and to the practitioner it will be invaluable as a ready manual by which he can determine the character of the case he is looking up, while at the same time it outlines a method of treatment. The work is well illustrated, and all in all the author has wrought exceedingly well, and we heartily recommend the little book and predict great popularity for it.

PRÆCO LATINUS. This is a Latin literary and critical monthly paper, the only one published in this country. TUSCULUM: This is a companion journal to the above. It is of a more primary

grade and exactly the thing for those who would like to review their Latin. Both journals should be found on the desk of the scholarly doctor. \$1 per annum each. Address 1328 Spring Garden street, Philadelphia.

THE ELECTRO-THERAPEUTIC GUIDE. Author and Publisher, Wm. F. Howe, M. D., President of the National College of Electro-Therapeutics, 168 Bellefontaine street, Indianapolis, Ind.

We have carefully examined this beautiful little work and are delighted with its clear, concise and practical way of rendering the doctor valuable assistance. The simplicity of the arrangement of tables for the treatment of different diseases showing the current indicated, position of electrode, etc., makes it an indispensable work for ready reference. Price \$2.50.

CRAY'S ANATOMY. A new edition of this standard work is in the hands of the booksellers. Although it follows the last edition by only three years, still it has been subjected to numerous changes and improvements that make it a necessity to the progressive physician and student. A more extended review will appear later.

A COMPEND OF THE PRINCIPLES OF HOMŒOPATHY as Taught by Hahnemann and Verified by a Century of Clinical Application. By Wm. Boericke, M. D., Professor of Materia Medica and Therapeutics at the Hahnemann Hospital College of San Francisco; Associate Author of the

Twelve Tissue Remedies of Schuessler; Stepping Stone to Homœopathy; Member of American Institute of Homœopathy, Etc.

Eclectic physicians often make use, and good use too, of homœopathic remedies. That this is not done even more frequently is due to the fact that the system is not thoroughly understood. The Compend is an attempt to elucidate the salient and vital points treated by Hahnemann, and thus to familiarize the student with the principles of Homœopathy. The author is a clear thinker and a physician of wide experience, and has availed himself of everything published that furthered the end in view. It goes without saying that the little volume will be of great assistance to those who wish to investigate the claims of Homœopathy.

NOTES.

THE MANUAL OF PHONOGRAPHY (325th thousand) By Ben Pitman and Jerome B. Howard. This work is designed for self-instruction in the art of shorthand writing, and is the proper book for the beginner. It contains a complete exposition of the system, from its simplest principles to the reporting style, arranged in alternate and opposite pages of instruction and phonographic exercises. Every principle is copiously illustrated with engraved examples for reading, and exercises in the ordinary type for writing practice. A large number of pages of engraved reading matter are included in the book. Extra cloth, \$1; boards, 80c. Address: The Phonographic Institute Co., Cincinnati, O.

ASEPSIN SOAP



MEDICINAL USES OF ASEPSIN SOAP.

FOR THE SKIN.—The antiseptic qualities of Asepsin and Borate of Sodium make this soap desirable for the preservation of the dermal tissues, and to remove and prevent cutaneous blemishes. It is valuable for roughness of the skin, acne, comedones, milium, blotches, excessive greasiness of skin, for softening and preventing roughness and chapping of the hands. It corrects abnormalities of the sebaceous glands, thereby regulating the lubrication of the skin, and is further useful to repair dermal tissues when they have been subjected to the deleterious action of chalks and cosmetic lotions.

CUTANEOUS DISEASES.—For the following skin affections it may be used freely with marked benefit: Acne vulgaris et rosacæ, seborrhoea, eczematous eruption, herpes, psoriasis, prurigo, syphilitic eruptions, dermatitis, ulcerations, pruritic conditions, parasitic diseases, as scabies, for the relief of rhus poisoning, and for the removal of pediculi. A clean skin is necessary in any course of medication, and Asepsin Soap is a rational cleanser.

IN SURGERY.—The surgeon will find it valuable for cleansing the patient as well as the operator's hands, sponges and instruments. For its cleansing and antiseptic effects it may be employed in wounds of all kinds, chilblains, bed sores, ulceration, pustules, and for removing offensive and irritating discharges, and as a foot wash.

IN GYNÆCOLOGY.—It is useful in irritating and offensive discharges concomitant to diseases of females, giving rise to pruritic and inflammatory conditions. Leucorrhoea, simple vaginitis and vulvitis, ulcerations and pruritus vulvæ, are conditions in which it is particularly indicated.

CONTAGIOUS DISEASES.—In the exanthemata it should be employed to hasten desquamation thereby shortening the period of contagiousness and hastening convalescence.

At the time I received the Asepsin Soap, I was suffering intensely from pruritus ani, and had already tried with scarcely even temporary relief, all—or nearly all—the standard remedies for this well-known ailment. I was well-nigh crazed with the intolerable itching, pricking, sticking, gnawing biting, burning pain. I had been nearly sleepless for several nights, and I was so busily engaged with my professional work all day long that it seemed to me that life was a burden, and I could get no rest at night. I frequently sprang from my bed, and ran wildly, crazily anywhere;—suicide would not be strange in anyone in such a condition.

Your Asepsin Soap I used without faith, but with astonishing and almost immediate relief and ease. I think I have never before recommended any special preparation, but nothing less than gratitude is due you for this benefit, and that gratitude I express most heartily now. I have delayed this letter many weeks, but I am still as thankful as ever, for my suffering was of a kind not to be forgotten,

PAUL T. BUTLER, M. D., Alamo, Michigan

ASEPSIN SOAP IS NOW READY FOR THE MARKET.

PRICE, \$1.40 PER DOZEN.

For toilet purposes, a cake of ordinary soap of this size is sold for 25 cents. In order to introduce it, on receipt of 40 cents in postage stamps, we will, for a time send one-fourth dozen cakes by mail to any physician who has not previously purchased it. Send for a quarter dozen, and you will never employ or recommend any other soap, either for toilet or medicinal purposes. Ask your druggist to keep it in stock. Address

**LLOYD BROTHERS,
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The Gate of Entry

For many infectious diseases is through the alimentary canal; and some one hastily said that "the digestive tube is the avenue to all vital power." How important it is, therefore, to keep the digestive fluids in a physiologically active condition: 1st to destroy or inhibit any microbic invaders, and 2d, to properly dispose of the individual's nutriment. When the functions of digestion are "below par," **LACTOPEPTINE** will remedy the condition by supplying to the digestive juices the ferments and acids in which they are deficient, thus assisting, in a purely natural manner, towards restoration of normal function. For all digestive ailments **LACTOPEPTINE** is far superior to pepsin alone.

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